

Office of Health Systems Development

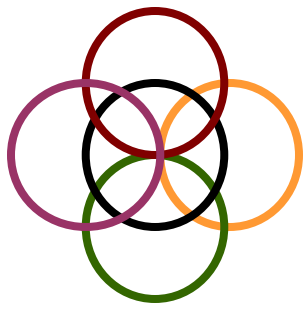
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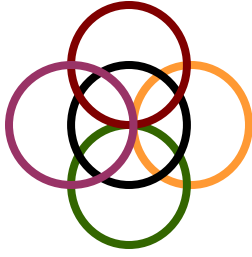
Leadership for a Healthy Arizona



Office of Health Systems Development

Mission:

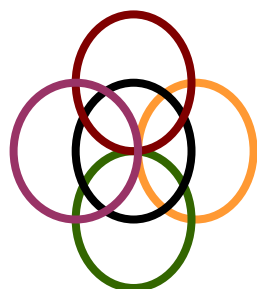
To optimize the health of Arizona residents by developing and strengthening systems services to expand access to primary care and other services with emphasis on the health needs of underserved people and areas



Arizona Department of Health Services
Office of Health Systems Development

Fact Sheets

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Arizona

Arizona Medically Underserved Areas

Purpose

The Arizona Medically Underserved Areas (AzMUA) designation is used for planning for delivery of primary care services.

Establishes eligibility for State Programs such as the Arizona Medical Student Loan Program, and for the former Tobacco Tax Primary Care Program.

Requirements

Designation is based on the Primary Care Index, which consists of 14 weighted items that include:

- Provider to population ratio
- Percent of population below poverty
- Transportation
- Percent of uninsured births
- Low Birth Weight
- Prenatal care
- Infant Mortality Rate
- Percent of Deaths before US expectancy
- Ambulatory sensitive conditions
- Percent of Minorities, Elderly and Unemployed

Highlights:

- AzMUA designation process began with the identification of rational service areas in Arizona, which led to the Arizona Primary Care Area Plan.
- Rational Service Areas are determined based on health care seeking patterns and demographic characteristics.
- Arizona Statute considers all Primary Care HPSAs as AzMUAs.

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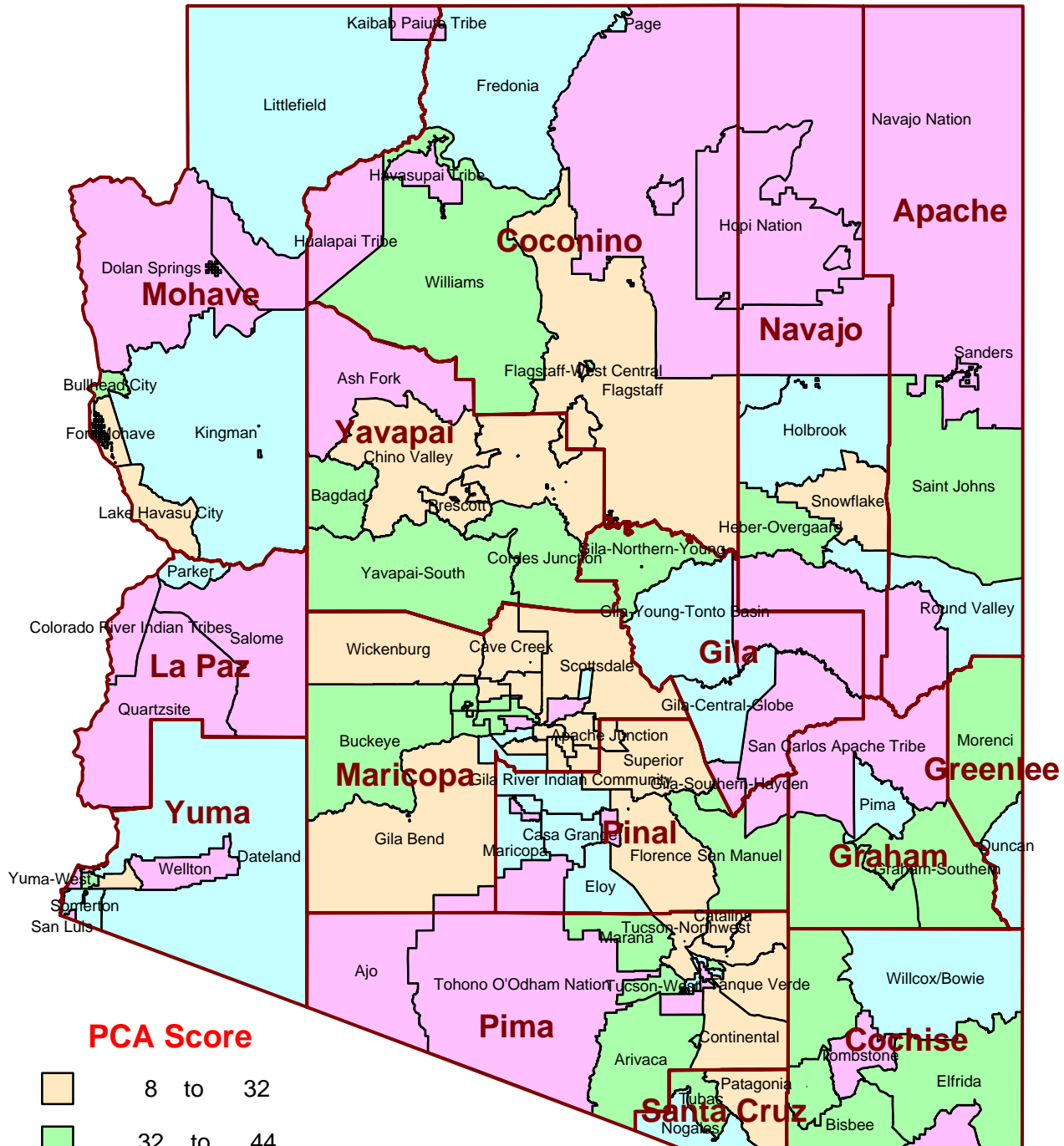
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Arizona

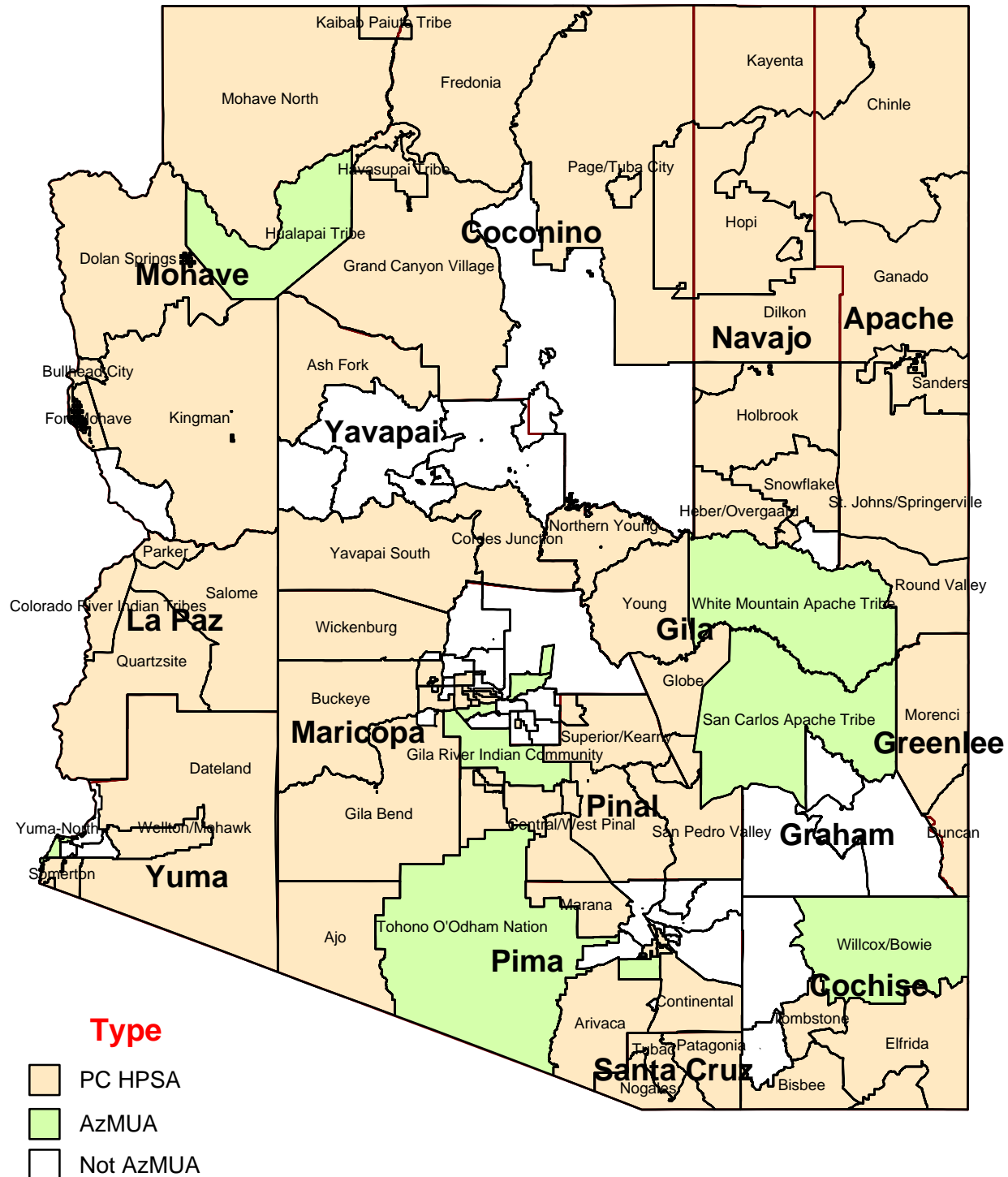
Primary Care Areas

2006

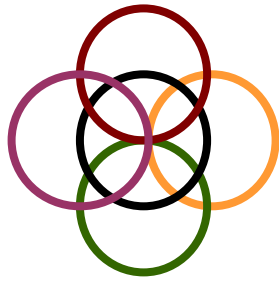


OFFICE OF HEALTH SYSTEMS DEVELOPMENT
Arizona Department of Health Services

July 2006



OFFICE OF HEALTH SYSTEMS DEVELOPMENT
Arizona Department of Health Services



Arizona Community Health Profiles

Purpose

To improve the accessibility to health-related data to facilitate evidence based health program planning, intervention & program implementation. The profiles provide information for 87 incorporated towns with comparisons to county state and national datasets.

Need

- Provide a unit of analysis smaller than county information for local planning and implementation.
- Provide an easily accessible statistical tool for grant applications.
- Extend the capacity of the County Officials statewide so that time can be devoted in public health beyond data gathering.
- Increase coalitions and other organizations capacity to compete for community level grants to ultimately improve their communities with available data for grants at the local level.
- Assist researchers and students in gaining an understanding of factors that influence and affect health outcomes.

Strategic Priorities

- Increase the awareness of the CHP tool in the community through training
- Examine trends and relationships between health status and determinants of health (social environment behavior, and health care resources).
- Convene ADHS staff to strategically address health issues, plan and implement programs using available data such as the CHPs
- Explore the feasibility of an on-line interactive database available with health related information at the census tract or zip code level to further characterize community needs.

Highlights:

- Data normally presented at the State, and County level
- Cities provide a more tangible denominator to report on

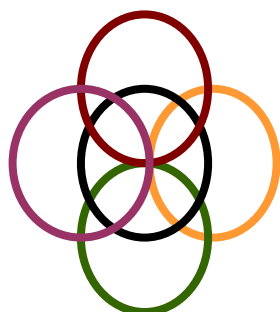
Indicators:

- Population
- Income
- Insurance
- Birth & Death
- Cancer
- Community Resources
- Infectious Disease
- Environmental Health (Lead)
- Preventive Services
 - Oral Health
 - Immunizations
- WIC
- Behavioral Risk Factor Survey
- Department of Economic Security (DES)

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Arizona *Community Development Program*

Purpose

To assist local underserved communities identify their primary care needs, build capacity and mobilize the local resources to develop or improve primary care services.

The Community Development program supports President Bush's National Initiative to improve primary care services for underserved areas and vulnerable populations by creating new and expanding the existing health centers.

Need

- Approximately 34% of Arizona population resides in Health Professional Shortage Areas (HPSA) and designated Medically Underserved Areas (MUA) or Medically Underserved Population (MUP).
- Current Federally Qualified Health Centers (FQHCs) in the state serve only 4.5% of Arizona's population.

Activities

- Identify underserved communities statewide and prioritize those that are requesting assistance and are ready to develop and improve their primary care services.
- Create, review, approve, and monitor local health agency's primary care grants to leverage additional dollars for underserved communities.
- Provide training, technical assistance, and targeted communities and disseminate information to assist the communities regarding the 330 funding process.
- Collaborate with community leaders to assess primary care needs and to develop strategies for program design, implementation and evaluation.
- Collect, analyze, and disseminate data and statistical reports.

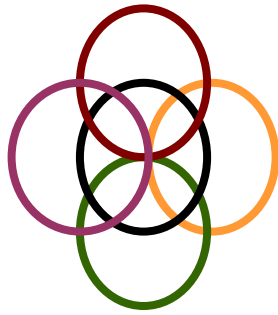
Highlights:

- 14 BPHC funded sites operating 82 access points that serve 265,259 Arizonans of which 52% are below 100% of federal poverty line and 34% are uninsured.
- 8 Primary Care Mini-Grant awards made for FY 05-06 in partnership with St. Luke's Health Initiatives and Arizona Health Facilities Authority.
- 5 counties identified as high priority for community development activities.
- 3 training sessions conducted on availability, and utilization of federal and state health data resources.

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Arizona Native American Community Development Program

Purpose

The goal of the Native American Program is to improve the development and accessibility of primary health care for Native Americans throughout Arizona through community development activities, technical assistance, data sharing, and identification of resources.

The Office of Health Systems Development Native American Community Development Program will serve as a resource to network with the resources available at the state and federal levels to enhance the capacities of Indian Primary Health Care Systems. The OHSD commits to involve tribal health care providers in OHSD driven efforts and to provide technical assistance to tribe driven efforts that represent their needs and views, all of which ultimately promotes high quality primary care for Native Americans.

Need

- Arizona American Indians total approximately 290,000 or 5% of the total state population and is the second largest state concentration of Native Americans in the Nation.
- There are 21 federally recognized tribes in Arizona. 63% of the Native American Population resides in rural areas and the remaining 37% live in urban areas.

Activities

- Identify underserved Native American communities statewide and determine their needs and "community readiness" to prioritize and tailor interventions based on need.
- Disseminate information, provide training, and technical assistance to targeted Native American communities to assist them including the 330 funding process.
- Collaborate with community leaders to assess primary care needs and to develop strategies for program design, implementation and evaluation.
- Provide and update annually, a resource directory documenting the sources of federal, state, and private assistance available for the development and delivery of primary care services.

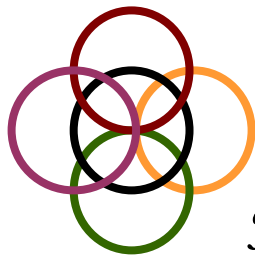
Highlights:

- 12 of the 15 counties in Arizona have reservation lands within them.
- Maricopa County has the highest American Indian population with over 90% of them being Urban Indians.
- The 21 tribal nations comprise 27% of the total land area of the state.

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Arizona

Health Professional Shortage Areas

Purpose

The federal Health Professional Shortage Area (HPSA) designation identifies an area or population as having a shortage of dental, mental, and primary health care providers.

HPSA designations are used to qualify for state and federal programs aimed at increasing primary care services to underserved areas and populations, such as the National Health Service Corps Program.

Requirements

A HPSA designation is based on three criteria, established by federal regulation:

- The area must be rational for delivery of health services
- A specified population-to-provider ratio representing shortage must be exceeded within the area as evidenced by more than 3,500 persons per physician (or 3,000 persons per physician if the area has "high needs")
- Health care resources in surrounding areas must be unavailable because of distance, overutilization or access barriers

Programs Using HPSA Designations Include:

- Arizona Loan Repayment Program
- Arizona Primary Care Area Program
- Arizona State J-1 Visa Waiver Program
- National Health Service Corps
- Medicare Incentive Payments
- Rural Health Clinics Act
- Arizona Medical Student Loan Program

Highlights:

- As of September 10, 2004, 60 areas and 13 facilities in Arizona are designated as Primary Care HPSA's.
- Arizona currently has 33 Primary Care HPSA's with scores greater than 14.
- Arizona has a shortage of 254 FTE primary care physicians.

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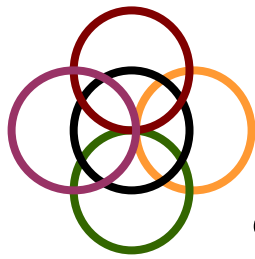
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Arizona

Primary Care Health Professional Shortage Areas

September 1, 2005





Arizona

Federal Medically Underserved Areas and Populations

Purpose:

The Federal Medically Underserved Area/Population (MUA/MUP) designation identifies areas or populations as having a need for medical services on the basis of demographic data. These designations are important when seeking a Federally Qualified Health Center status.

Requirements:

Designation is based on an area having an Index of Medical Underservice (IMU) score less than or equal to 62.0 points. The IMU is a weighted score derived from four criteria:

- Ratio of primary medical care physicians per 1,000 population
- Infant mortality rate
- Percentage of population below the federal poverty level
- Percentage of the population 65 years and older

Eligibility:

Geographic areas that are rational areas for delivery of services and meet the IMU score requirement are eligible for a federal MUA/MUP designation.

Designation is not a competitive process. Any person or organization may apply on behalf of an area.

Benefits:

- Enhanced federal grant eligibility
- Eligibility to apply for federal funding to develop and operate Community Health Centers, Migrant Health Centers, Health Care For The Homeless, Federal Qualified Health Centers (FQHCs) and FQHC Look-A-Likes
- Eligibility for enhanced reimbursement for Rural Health Clinics
- J-1 Visa Waiver Program
- Arizona Medical Student Loan Program

Highlights:

- As of March 8, 2005, 47 areas in Arizona have federal MUA/MUP designations.
- Currently, 9 Arizona counties have MUA designations in addition 7 also have MUP designations.

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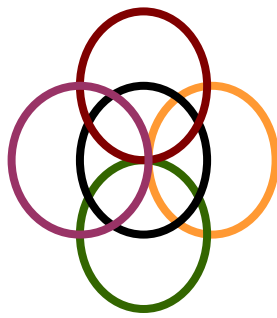
Arizona

Federal Medically Underserved Areas & Populations

March 8, 2005



OFFICE OF HEALTH SYSTEMS DEVELOPMENT
Arizona Department of Health Services



Arizona

Primary Care Program

Purpose

The Arizona Primary Care Program, originally titled the Tobacco Tax Primary Care Program, is instrumental in Arizona's efforts to address the health care needs for vulnerable population groups, the uninsured and underserved residents of the State, with the overarching vision to reduce health disparities and improve health outcomes by assuring that eligible, uninsured, Arizonans have access to comprehensive, community-based, culturally responsive primary care services.

The Primary Care Program clinics serve as "Safety Net Providers" throughout the State, therefore, their important role in reducing health disparities

Need

- 18.2% of Arizona's population of all ages is uninsured (Census 2000)
- 15.8% of Arizona's children under age 18 are uninsured
- Unequal access to health lead to avoidable inequities in health outcomes or *Health Disparities*
- The primary care model has proven to be cost-effective in tackling health disparities
- 82,819 primary care medical and dental visits during FY 05

Comprehensive Services

- Outreach
- Primary care and preventive health services
- Prenatal care and family planning services
- Preventive dental services
- Early Periodic Screening and Diagnostic Testing (EPSDT)
- Diagnostic laboratory and imaging services
- Pharmacy
- Health education and health promotion activities
- Medically necessary, non-emergency ground transportation
- Patient referral, tracking and follow-up
- Emergency stabilization services
- Foster cultural and linguistic competence within healthcare systems

Highlights:

- Twenty awards made for FY 05-06 offer comprehensive community based primary care services.
- 11 Contractors provide services in rural Arizona
- 152 clinics in 13 Counties of the State.
- 55 sites are School-Based, 4 are Hospital-Linked.
- Eleven of the twenty contractors that started with Part A funding are now providing ALL expected primary care services.

Contact Us:

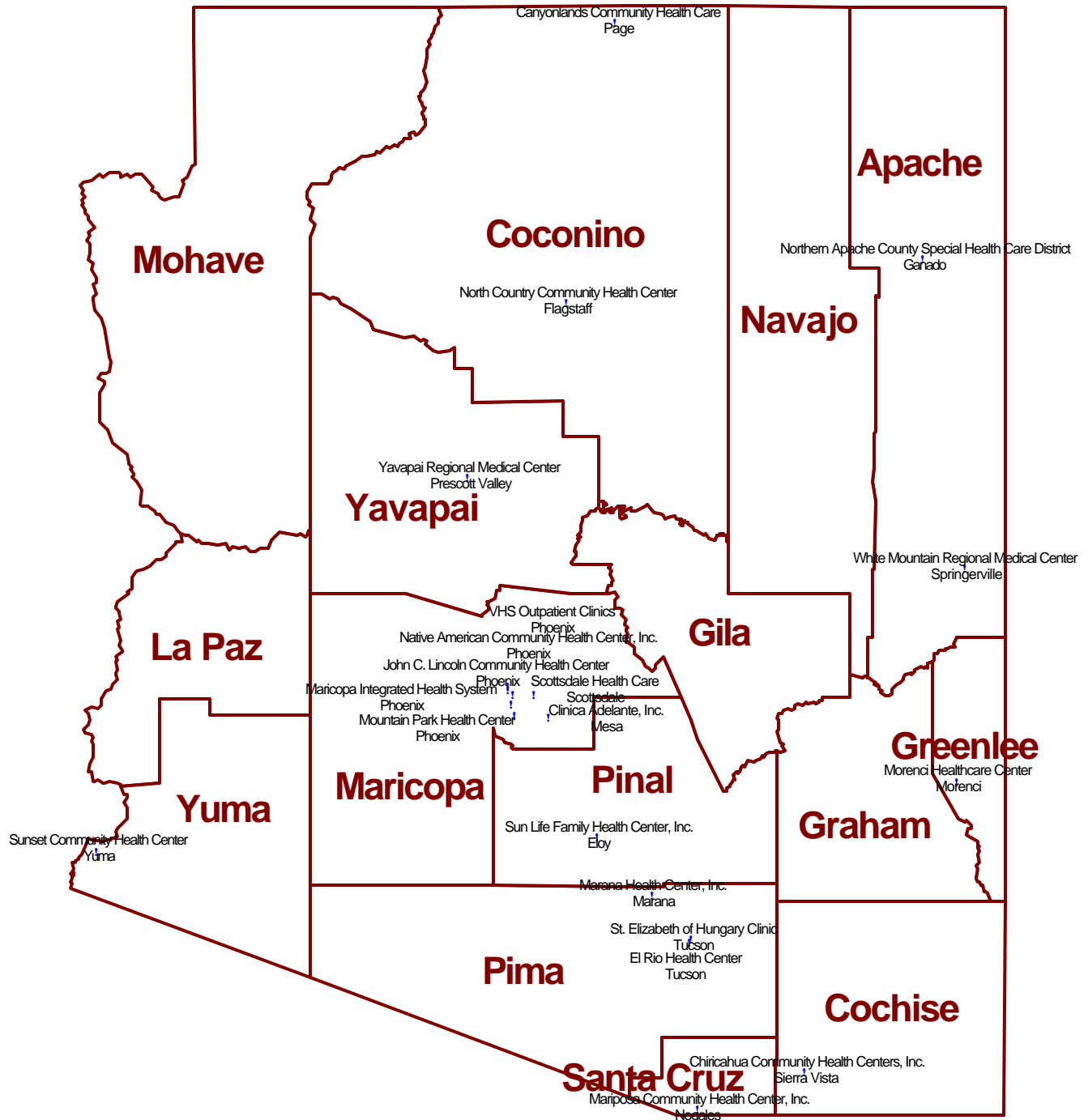
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Arizona

Primary Care Contractors

2005



OFFICE OF HEALTH SYSTEMS DEVELOPMENT
Arizona Department of Health Services



Purpose

In Spring 1995, House Bill 2275 allocated \$250,000 per year of Tobacco Tax revenues to establish a telemedicine program designed to facilitate provision of medical services to low income, indigent or uninsured persons living in medically underserved areas.

In 1996 the Northern Arizona Regional Behavioral Health Authority (NARBHA) received funding from the Arizona Telemedicine Program "NARBHA NET" that helped develop a telemedicine system that was recognized as a "Program of Excellence" and one of the Top Ten telemedicine programs in the nation by the Telemedicine and Telehealth Networks Magazine.

Currently, the Arizona Telemedicine Program funds projects at the University of Arizona, Rural Health Office and at the ADHS Office of Children with Special Health Care Needs.

Need

- To develop and strengthen community based systems and services, and expand access to primary care services to Arizona residents who reside in medically underserved areas.

Services

University of Arizona – Rural Health Office – Mobile Health Program:

- Interfaces with the Arizona Telemedicine Program to provide access to health care, eye and foot screenings for persons with diabetes in geographically underserved areas, as a strategy to improve clinical outcomes.

Office of Children with Special Health Care Needs:

- Through the OCSHCN/CRS Regional Tele-medicine Network, Increases access to comprehensive care for children and youth with special health care needs especially those in rural and underserved areas.
- Provides educational opportunities to health care providers, children, and youth with special health care needs and their families, and to community organizations.

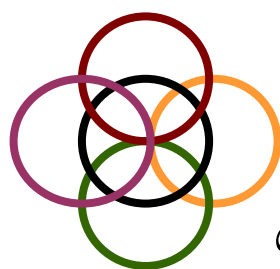
Highlights:

The Mobile Health Program enhances the ability of the Arizona Primary Care Program to provide standards of care for patients with diabetes by making the Arizona telemedicine program available to communities served by the following clinics:

- Marana Community Health Center
- Pinal County Health Department
- Morenci Community Health Center
- Chiracahua Community Health Center

Contact Us:

Arizona Telemedicine Program
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AZ Department of Health Services
1740 West Adams Suite 410
Phoenix, Arizona 85007
602-542-1219



Arizona *Non-Renal Transplant Medications* *Program*

Purpose

House Bill 2422 allocated \$200,000 annually (subject to availability of funds) for contracts with hospitals licensed by the Department of Health Services that perform non-renal organ transplant operations.

To make post-surgical, transplant related medications available to eligible patients, with the goal to assist in the long-term survival of non-renal transplant recipients.

Eligibility

- Arizona residents who are Non-renal, solid organ transplant recipients
- Medicare enrollee with no prescription medication benefits.
- Medicare enrollee with immunosuppressant coverage only.
- Primary and/or secondary insurance enrollees with exhausted or insufficient prescription medication benefits
- Individuals without insurance who are ineligible for Arizona Health Care Cost Containment System (AHCCCS) coverage.

Services

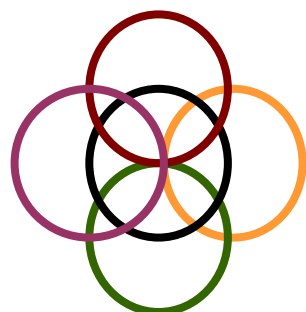
- University Medical Center (UMC) in Tucson, Arizona, is the sole contractor for provision of the Non-Renal Transplant Medications Program services.
- Medications include:
 - Anti-rejection
 - Anti-viral/Anti-bacterial
 - Anti-hypertensive drugs
- No over-the-counter drugs are provided.

Highlights:

- Exhausted benefits are those benefits that expire after a given time period or expenditure cap.
- Insufficient benefits are defined as coverage that does not include the covered medications prescribed by this program.
- Covered medications are those that are prescribed by a medical doctor for transplant specific indications.

Contact Us:

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Medications Program
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Arizona Loan Repayment Program

Purpose

Provides an incentive for primary care providers and dentists to work in underserved areas of the State.

Program funds are used to repay qualifying educational loans in return for primary care services in federally designated Health Professional Shortage Areas (HPSAs).

Eligibility

Arizona Licensed and/or board certified:

- Medical Doctors
- Doctors of Osteopathic Medicine
- Physician Assistants
- Nurse Practitioners
- Certified Nurse Midwives
- Dentists

Requirements

Service sites must:

- Accept AHCCCS/Medicaid, SCHIP/Kids Care, and Medicare
- Have a Sliding Fee Schedule and policy in place
- Be located in a federally designated HPSA

Award Amounts*

	Physicians/Dentists			PA/NP/CNM		
1st year	\$20,000	\$18,000	\$16,000	\$7,500	\$6,000	\$5,000
2nd year	\$20,000	\$18,000	\$16,000	\$7,500	\$6,000	\$5,000
3rd year	\$22,000	\$20,000	\$18,000	\$9,000	\$7,500	\$6,500
4th year	\$25,000	\$22,000	\$20,000	\$10,500	\$9,000	\$8,000

*based on availability of funding

Highlights:

- 15 providers contracted during Fiscal Year 2005
- 10 providers are located in rural communities
- State Loan Repayment awards are tax exempt
- Primary Care Services include:
 - o General Practice
 - o Family Medicine
 - o Internal Medicine
 - o Pediatrics
 - o Obstetrics/Gynecology
 - o Dentistry

Potential service sites

- Public Non-Profit located in Urban or Rural HPSAs
- Private Practices located in Rural HPSAs

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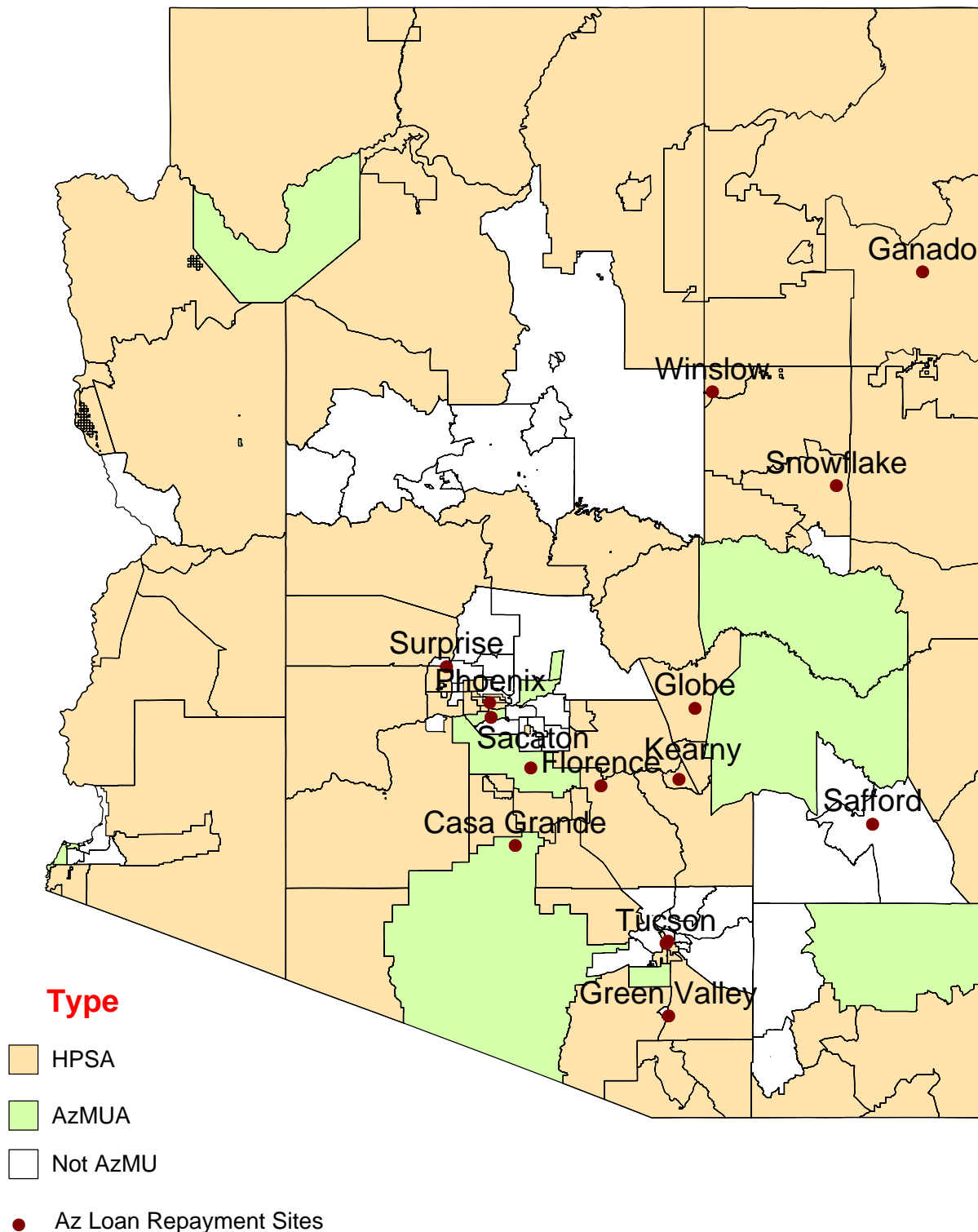
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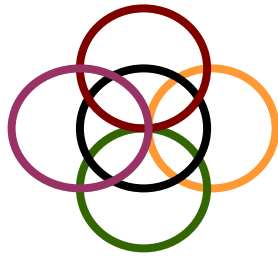
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Loan Repayment Sites in Arizona Medically Underserved Areas (AzMUAs)

August 2006





Arizona

J-1 Visa Waiver Program (Conrad 30)

Purpose

The goal of the Arizona Department of Health Services (ADHS) J-1 Visa Waiver Program is to improve accessibility to health care for underserved areas by supporting J-1 visa waiver requests on behalf of foreign medical graduates who have obtained a J-1 visa for graduate medical studies in the United States ("J-1 physicians") if the community is unsuccessful in recruiting a U.S. citizen medical provider.

Requirements

- Provide services in federally designated Health Professional Shortage Areas (HPSA), Medically Underserved Areas (MUA), or Medically Underserved Populations (MUP)
- Signed contract for full time (40 hrs/wk) employment
- Service Site operational for at least 6 months prior to J-1 Visa Waiver Program opening date
- Uses a Sliding to Discount Fee schedule based on current Federal Poverty Guidelines

Preference Criteria

- Physicians who speak Spanish or a significantly represented language in the designated area
- Outpatient Care
- Rural Location
- Service sites that are: Federally Qualified Health Centers (FQHCs), Look A-likes, Rural Health Clinics, or contractor of the Arizona Primary Care Program
- Single Service Site
- The program does not support J-1 physicians in research positions, long term care, chronic care, rehabilitation facilities or Emergency Medicine.

Highlights:

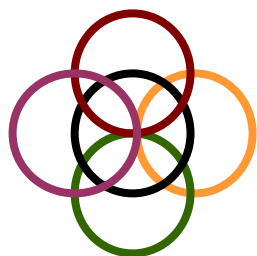
- 30 Slots available every year to provide letters of support to J-1 Physicians
- 22 Slots for primary care physicians and psychiatrists
- 7 Slots for specialist physicians
- Currently 104 J-1 providers serving in 12 counties within Arizona.

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Arizona *National Interest Waiver Program*

Purpose

The federal National Interest Waiver (NIW) program allows foreign workers with advanced degrees, including foreign physicians (MDs), with exceptional abilities to work in the United States.

A national interest waiver granted to a foreign physician by the U.S. Citizenship and Immigration Services (USCIS) of the Department of Homeland Security exempts the foreign physician from the labor certification process administered by the U.S. Department of Labor.

The Arizona Department of Health Services (ADHS) has determined that participation in the NIW program will promote the effective use of health manpower and facilities in this state as required by A.R.S. § 36-104(16). The ADHS' participation in the NIW program will increase access to health care for the underserved residents of this state.

Eligibility

- Primary Care physicians who have obtained a J-1 visa waiver from the USCIS based on an ADHS J-1 visa waiver letter of support
- Have practiced as Arizona J-1 primary care physicians for at least 1 year immediately preceding the request for an ADHS NIW attestation letter.
- Provide outpatient primary care services on a full time basis at a qualifying service site

Qualifying Sites

- The service site must be located within a RURAL federally designated HPSA, MUA, MUP community
- Federally Qualified Health Center (FQHC) or FQHC Look-A-Likes
- Rural Health Clinic
- Arizona Primary Care Program Clinic
- Correction or detention facility

Highlights:

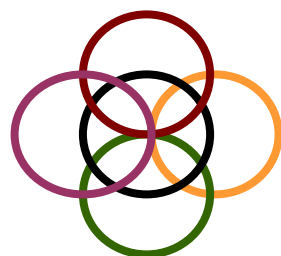
- Seven awards made since program was re-opened (June 2005) for primary care based services.
- Foreign physicians who obtain a national interest waiver from the USCIS based on an ADHS NIW attestation letter must serve the uninsured and under-insured, regardless of ability to pay; must accept Medicaid (AHCCCS) and Medicare assignment; and must use a sliding fee schedule.

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Arizona *National Health Service Corp (NHSC)*

Purpose

The National Health Services Corps (NHSC) recruits and places health professionals at eligible sites within federally designated HPSAs.

Eligibility

For a site to qualify for inclusion in the NHSC Recruitment and Retention Assistance List, it must:

- Be part of a system of care, which provides a service continuum that includes comprehensive primary care and appropriate arrangements for secondary and tertiary care.
- Be located in a federally designated primary care HPSA.
- Have a documented record of sound fiscal management.
- Be accessible to individuals regardless of ability to pay.
- Accept Medicaid and Medicare beneficiaries.
- Maintain a sliding discount fee schedule that assures there is no financial barrier to care for those below 200 percent of poverty.
- Agree that NHSC providers will be employed full time and their work week will not be less than four days.
- Maintain a retention component to encourage retention of all health professionals including NHSC providers.
- Maintain a salary and benefits package equal or greater than that offered to Federal civil service employees.
- Maintain malpractice coverage, which includes full payment for any tail coverage, which may be required.

Mission:

The National Health Service Corps (NHSC) is committed to improving the health of the Nation's underserved:

- Uniting communities in need with caring health professionals
- Supporting communities' efforts to build better systems of care

NHSC Providers include:

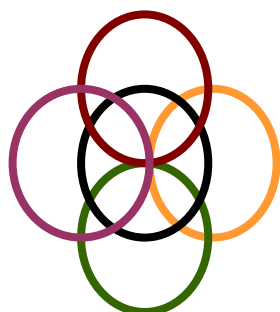
- Primary care physicians,
- Nurse practitioners,
- Physician assistants,
- Certified nurse-midwives,
- Dentists,
- Dental hygienists,
- Mental health professionals.

Contact Us:

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Arizona Center for Minority Health

Purpose

The Center for Minority Health will serve as Arizona's central source of information and resources related to minority health and health disparities. The Center will provide leadership by building networks and community capacity to promote the health and wellness of all people in Arizona. Health disparities are avoidable differences in the incidence, prevalence, mortality, and burden of disease within specific population groups.

Need

- In 2003 Blacks, American Indians, and Hispanics ranked worst in overall health status in Arizona.
- Hispanics comprise more than 25% of the states population.
- Thirty-five percent (35%) of Arizona residents belong to an ethnic or racial minority group.
- Arizona's uninsured population is disproportionately representative of minority groups.

Strategic Priorities

Priority 1: Emerge as a visible, trusted, reliable Resource Center and Point-of-Contact for minority communities and other stakeholders and interested parties

Priority 2: Bring a minority health focus to the programs and policies of ADHS by serving as the resource within ADHS for improved planning and coordination of activities and programs

Priority 3: Improve minority health surveillance by developing systematic and consistent data collection and analysis

Priority 4: Partner with other entities dedicated to addressing minority health issues and work to improve access to health services

Priority 5: Identify and develop outreach strategies tailored to the needs of minority communities

Priority 6: Increase the capacity and diversity of the healthcare workforce

Priority 7: Increase the capacity of minority communities in the state for health promotion and disease prevention

Priority 8: Encourage and promote cultural competence healthcare practices and interventions by health care providers and state agencies

Mission

To promote and protect the health and well being of the minority and vulnerable populations of Arizona by enhancing the capacity of the public health system to effectively serve minority populations and reduce health disparities

Vision

Health equity for all

We envision a state where each person has equal opportunity to prevent and overcome disease and live a longer, healthier life.

Contact Us

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